AFFIDAVIT OF SURVIVING SPOUSE OR NEXT OF KIN

State of)			
County of) SS:)			
I (First, middle, last nan		being duly swor	n according to l	aw, declare that I
reside at		•		and
reside at(Street addres	rs)	(C	ity, State)	
that on(Date)	······································	I CI D	, who	made no will, had
(Date)	(1)	Name of the Dec	eased)	
the decedent's estate un	er, child, father ircle relationsh der the laws of	r, mother, other and aip)	and as such am e	
NAMES Please insert the names of children, father and/or mo	living relatives			
Name	Date/Plac	ee of Birth	Address	Relationship

-	(Signature of Affiant)	
ubscribed and sworn (or affirmed to)) before me by	at
) before me by	_ at
		_ at
		_ at
		_ at
on		_ at
on		_ at